

Provider Profiling: Substance Use Outpatient and Partial Hospitalization Report

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Agenda

- Review the purpose of Provider Profiling.
- Review updates and improvements made to Provider Profiling Reports.
- Provide an overview of the current Provider Profiling reports.
- Present information on the distribution and review of Provider Profiling reports.
- Provide an overview of the new Substance Use Outpatient and Partial Hospitalization Services Provider Profiling Report.
- State future plans for Provider Profiling.

Objectives

Providers will:

- Understand the purpose of Provider Profiling.
- Be informed of the improvements to Provider Profiling.
- Become familiar with what is contained in Provider Profiling reports.
- Know when to expect to receive Provider Profiling reports.
- Become familiar with the new Substance Use Outpatient Provider Profiling Report.

Purpose of Provider Profiling

- Provider Profiling is conducted twice a year in order to collect and trend data which provides an evaluation of Provider performance, with the overall intent of improving quality of care given to PerformCare Members.
- PerformCare monitors and assesses Provider performance based on level of care metrics with Provider Profiling reports.
- PerformCare shares Provider Profiling results with Providers. This can help Providers see how they compare to peers.
- PerformCare makes Provider Profiling reports available to Members on the PerformCare website. The information can help Members in choosing a Provider.
- Provider Profiling reports are shared with the appropriate Primary Contractors, and are made available on the PerformCare website for Providers and Members to review.

PerformCare is continually looking for ways to refine and improve the Provider Profiling process.

PerformCare strives to ensure that:

- Provider Profiling reports meet all requirements.
- Reports and metrics are relevant to the level(s) of care targeted in the reports.
- Reports allow Providers to compare themselves to peers.
- Reports provide Members with information that may assist them in choosing a Provider.
- Reports allow PerformCare to identify opportunities for improvement with Providers.
- Providers are able to understand information in the reports, and make improvements to their programs as needed.

The PerformCare interdepartmental workgroup reviewed research materials and requirements and determined:

- The frequency of Provider Profiling reports and the timeframe for the reports.
- The format and presentation of Provider Profiling reports.
- The levels of care to be included in Provider Profiling reports.
- The metrics for each level of care included in the Provider Profiling reports.
- How Provider Profiling reports are reviewed with Providers.
- The follow up that could be completed with Providers if concerns were noted in the reports.

PerformCare utilizes data based on a Fiscal Year for Provider Profiling Reports.

Provider Profiling reports are distributed to Providers semiannually:

- Mid-Year Provider Profiling Reports are distributed in July, and include data from the first two quarters of the previous fiscal year.
- Year-End Provider Profiling Reports are distributed in January, and include data from the full previous fiscal year.

- Provider Profiling reports are not de-identified, allowing Providers to see how their performance compared to others in the network.
- PerformCare will include several levels of care grouped into one report, if they are in a similar category.
- PerformCare will make the reports available on the website, to allow Providers and Members to review the reports.

Levels of Care Profiled

Currently, PerformCare profiles eight levels of care:

- Behavioral Health Rehabilitation Services
- Community Based Mental Health Services (Peer Support, Psychiatric Rehabilitation, Targeted and Blended Case Management)
- Family Based Mental Health Services
- Mental Health Inpatient
- Mental Health Outpatient (Mental Health Outpatient Therapy and Psychiatric Medication Management)
- Mental Health Partial Hospitalization
- Substance Use Inpatient (Inpatient Detoxification, Non-Hospital Detoxification, Inpatient Rehabilitation, Non-Hospital Rehabilitation (Levels 3B and 3C), NH Half Way House)
- Substance Use Outpatient and Partial Hospitalization

Metrics (or measures) vary by Level of Care; some of the metrics which Provider Profiling reports examines include:

- Length of stay/duration of services/number of unique Members served
- Readmission rates
- Follow-up rates
- Access data
- Utilization data
- Consumer/ Family Satisfaction Team Data
- Any other agreed-upon metric which is appropriate to the level of care

Each metric includes an explanation of the purpose and method of data collection.

Some metrics contain a performance goal and some are included for informational purposes.

PerformCare clearly identifies the metrics which contain a performance goal. For these metrics, PerformCare will monitor individual Provider performance.

Substance Use Outpatient and Partial Hospitalization Report

- Introduced January 2019 for the Fiscal Year 2017-2018 report.
- This report profiles Outpatient, Intensive Outpatient and Partial Hospital levels of care.
- Includes 4 measures:
 - 7-day access for SU OP
 - 7-day access for SU IOP
 - 7-day access for SU PHP
 - SU OP Member engagement in 2 or more appointments.
- Includes C/FST Survey data (as available) in Year-End reports.
- All measures on the SU Outpatient and Partial Hospitalization report exclude Providers with less than 30 requests, and exclude Members with TPL.
- Performance goals have not yet been established for the SU Outpatient and Partial Hospitalization measures.

Substance Use Outpatient and Partial Hospitalization Report Measures

Measuring access rates is important to ensure that PerformCare Members are able to access services in a timely manner. The first 3 measures calculate the percentage of Members receiving or being offered an appointment within the standard of 7 days for substance use outpatient, intensive outpatient, or partial hospitalization services. These measures are based upon claims data for unique Members accessing substance use treatment during the specified timeframe of the report.

Measure 1: 7-Day Access for Substance Use Outpatient Therapy

The rates are calculated as follows:

Denominator: All initial evaluation or therapy assessments, broken out respectively.

Numerator: Number of records of a compliant follow-up appointment being offered within 7 days of initial evaluation or therapy assessment.

Substance Use Outpatient and Partial Hospitalization Report Measures

Measure 2: 7-Day Access for SU IOP

The rates are calculated as follows:

Denominator: All requests for SU IOP received within the reporting period.

Numerator: Number of records where service start occurred within 7 days of the request date.

Measure 3: 7-Day Access for SU PHP

The rates are calculated as follows:

Denominator: All requests for SU PHP received within the reporting period and had an SU PHP claim.

Numerator: Number of records with matching SU PHP claims where service occurred within 7 days of the request date.

Substance Use Outpatient and Partial Hospitalization Report Measures

Measure 4: SU OP Therapy Engagement in 2 or more Appointments

After a Member meets with their therapist for their first session, their continued engagement in treatment is vital in helping to support their wellness. This measure examines the number of Members who had their first SU OP therapy session with a therapist that also continued to stay engaged in treatment by attending 2 or more therapy appointments within 30 days. This data is based on initial therapy sessions and follow-up appointments from claims submitted during the specified timeframe of the report.

PerformCare calculates the rates as follows:

Denominator: All initial SU OP therapy appointments (1st session with a therapist after an intake assessment).

Numerator: Number of initial SU OP therapy appointments that resulted in continued engagement in 2 or more therapy appointments within 30 days. Individual, group and family therapy are treated as valid follow-up appointments following the initial therapy appointment.

- Provider Profiling reports are distributed twice a year. Providers are encouraged to contact PerformCare with any questions or concerns with the reports.
- Provider Profiling reports are also posted on the PerformCare website for Providers and Members to access.
- An informational webinar will be recorded and posted online for Providers to review when any new level of care is added to the Provider Profiling reports.

PerformCare will identify Providers who do not meet the goal on two consecutive year-end reports for one or more measures.

PerformCare will send the Provider a letter notifying the Provider that they are required to submit a response as to how they plan to improve the identified measure(s).

- The Provider response is required within thirty (30) days of receipt of the letter.

PerformCare will continue to compile and distribute Provider Profiling Reports on a semi-annual basis.

PerformCare reviews Provider Profiling reports on an ongoing basis to determine if additional levels of care can be profiled, and to determine if changes are needed to current Provider Profiling metrics.

PerformCare gathers and incorporates feedback from Providers, Members, and Stakeholders in our effort to continually improve Provider Profiling reports.

Questions, Comments, Feedback?

Any questions, comments, or feedback related to Provider Profiling Reports or the Provider Profiling process can be submitted to:

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